RETIREE HEALTH INSURANCE PROGRAMS MONTHLY COST BEGINNING FEBRUARY 1, 2004 THROUGH JANUARY 31, 2005

GREAT-WEST	POS (LB CHOICE & GW)	HIGH	VALUE PLAN	LOW
RETIREE + DEPENDENT(S)	\$ 690.55	\$1,202.53	\$ 748.80	\$ 586.05
SINGLE RATE	\$ 551.13	\$ 953.88	\$ 585.62	\$ 468.52

PACIFICARE	HIGH	LOW*
RETIREE + DEPENDENT(S)	\$ 633.72	\$ 475.58
SINGLE RATE	\$ 440.37	\$ 322.54

RETIREE DENTAL INSURANCE PROGRAMS

DELTA DENTAL = \$82.04 PER MONTH (\$984.48 PER YEAR) \$2,000 Annual Maximum Coverage Limit per person if DPO network dentist used.

(available outside of CA effective 02/01/04)

\$1,000 if out of network dentist used.

PACIFICARE = \$40.57 PER MONTH (\$486.84 PER YEAR) No Annual Maximum Coverage Limit.

^{*} Available during <u>retiree</u> open enrollment

RETIREE MEDICARE SUPPLEMENT HEALTH INSURANCE PROGRAMS MONTHLY COST BEGINNING FEBRUARY 1, 2004 THROUGH JANUARY 31, 2005

GREAT-WEST MEDICARE SUPPLEMENT PLAN		PLAN		
RETIREE ON MEDICARE + NON-MEDICARE DEPENDENT	POS (LB CHOICE & GW) \$ 690.55	HIGH \$1202.53	VALUE PLAN \$ 748.80	LOW \$ 586.05
TWO MEDICARE MEMBERS (RETIREE + SPOUSE)	\$ 779.41	*		7
ONE MEDICARE MEMBER – RETIREE OR SURVIVING SPOUSE	\$ 389.71			

PACIFICARE MEDICARE COORDINATION PLAN - MUST HAVE MEDICARE A & B	HIGH	LOW*
RETIREE + SPOUSE (1 MEDICARE MEMBER, 1 NON-MEDICARE)	\$ 937.90	\$ 875.32
RETIREE + FAMILY (1 MEDICARE MEMBER, DEPENDENTS)	\$1194.01	\$1109.66
RETIREE + FAMILY (2 MEDICARE MEMBERS, DEPENDENTS)	\$ 927.18	\$ 870.15
RETIREE + SPOUSE (2 MEDICARE MEMBERS)	\$ 644.24	\$ 610.16
SINGLE RATE (RETIREE OR SURVIVING SPOUSE)	\$ 322.12	\$ 305.08

SECURE HORIZONS. MEDICARE MEMBER MUST ASSIGN MEDICARE BENEFITS TO PACIFICARE

ONE MEDICARE MEMBER WITH TWO OR MORE NON-MEDICARE MEMBERS	\$ 920.34
ONE MEDICARE MEMBER WITH ONE NON-MEDICARE MEMBER	\$ 529.86
TWO MEDICARE MEMBERS WITH ONE NON-MEDICARE MEMBER	\$ 799.40
TWO MEDICARE MEMBERS (RETIREE + SPOUSE)	\$ 408.92
ONE MEDICARE MEMBER – RETIREE OR SURVIVING SPOUSE	\$ 204.46

^{*}Available during <u>retiree</u> open enrollment.